

MORALES ANTONINO LOREDO T#79622
M.C.S.P. A#4 205 P.O. Box - 409020
IONE CA 95640 - 409020

FILED

JAN 31 2008

RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

E-filing

CRB

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

MORALES ANTONIO LOREDO
Plaintiff,

vs.

Defendant.

CV 08 1 0753

CASE NO. _____

**PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS**

(PR)

I, MORALES ANTONIO L., declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ____ No XX

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: NONE 0 Net: NONE 0

Employer: NONE 0

1 If the answer is "no," state the date of last employment and the amount of the gross and net
 2 salary and wages per month which you received. (If you are imprisoned, specify the last
 3 place of employment prior to imprisonment.)

4 NONE

5 NONE

6 NONE

7 2. Have you received, within the past twelve (12) months, any money from any of the
 8 following sources:

9 a. Business, Profession or Yes ___ No XX

10 self employment

11 b. Income from stocks, bonds, Yes ___ No XX

12 or royalties?

13 c. Rent payments? Yes ___ No XX

14 d. Pensions, annuities, or Yes ___ No XX

15 life insurance payments?

16 e. Federal or State welfare payments, Yes ___ No XX

17 Social Security or other govern-

18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount
 20 received from each.

21 NONE

22 NONE

23 3. Are you married? Yes ___ No XX

24 Spouse's Full Name: NA

25 Spouse's Place of Employment: NA

26 Spouse's Monthly Salary, Wages or Income: NA

27 Gross \$ NONE 0 Net \$ NONE 0

28 4. a. List amount you contribute to your spouse's support: \$ 0

b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

NONE

NONE

5. Do you own or are you buying a home? Yes ___ No XX

Estimated Market Value: \$ 0 Amount of Mortgage: \$ 0

6. Do you own an automobile? Yes ___ No XX

Make NA Year NA Model NA

Is it financed? Yes ___ No XX If so, Total due: \$ 0

Monthly Payment: \$ 0

7. Do you have a bank account? Yes ___ No XX (Do not include account numbers.)

Name(s) and address(es) of bank: NONE

NONE

Present balance(s): \$ 0

Do you own any cash? Yes ___ No XX Amount: \$ 0

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes ___ No XX

NONE

8. What are your monthly expenses?

Rent: \$ 0 Utilities: NONE

Food: \$ 0 Clothing: NONE

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on this Account
<u>NONE</u>	\$ <u>0</u>	\$ <u>0</u>
<u>NONE</u>	\$ <u>0</u>	\$ <u>0</u>
<u>NONE</u>	\$ <u>0</u>	\$ <u>0</u>

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

NONE

NONE

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ___ No XX

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

NONE

NONE

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

1-23-08
DATE

Antonio Morales
SIGNATURE OF APPLICANT

Case Number: _____

CERTIFICATE OF FUNDS
IN
PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of NONE for the last six months at

M.C.S.P. IONE Ca [prisoner name]
_____ where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 0 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 0.

Dated: _____

[Authorized officer of the institution]

CALIFORNIA DEPARTMENT OF CORRECTIONS
 MULE CREEK STATE PRISON
 INMATE TRUST ACCOUNTING SYSTEM
 INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JUL. 01, 2007 THRU JAN. 02, 2008

ACCOUNT NUMBER : T79622

BED/CELL NUMBER: A 0400000000205L

ACCOUNT NAME : MORALES, ANTONIO LOREDO

ACCOUNT TYPE: I

PRIVILEGE GROUP: B

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD AMOUNT
09/14/2007	H104	DAMAGES HOLD	IDCARD 993	5.00

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRANSACTIONS TO BE POSTED
0.00	0.00	0.00	0.00	5.00	0.00

CURRENT
 AVAILABLE
 BALANCE

5.00-

REPORT ID: TS3030 .701

REPORT DATE:

PAGE NO:

CALIFORNIA DEPARTMENT OF CORRECTIONS
MULE CREEK STATE PRISON
INMATE TRUST ACCOUNTING SYSTEM
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: JUL. 01, 2007 THRU JAN. 02, 2008

ACCOUNT NUMBER : T79622

BED/CELL NUMBER: A 0400000

ACCOUNT NAME : MORALES, ANTONIO LOREDO

ACCOUNT TYPE: I

PRIVILEGE GROUP: B

TRUST ACCOUNT ACTIVITY

<< NO ACCOUNT ACTIVITY FOR THIS PERIOD >>

CURRENT HOLDS IN EFFECT

DATE PLACED	HOLD CODE	DESCRIPTION	COMMENT	HOLD A
09/14/2007	H104	DAMAGES HOLD	IDCARD 993	

TRUST ACCOUNT SUMMARY

BEGINNING BALANCE	TOTAL DEPOSITS	TOTAL WITHDRAWALS	CURRENT BALANCE	HOLDS BALANCE	TRAN TO E
0.00	0.00	0.00	0.00	5.00	

CI
AV/
B/

0205L

DUNT

00

ACTIONS
POSTED

0.00

RENT
TABLE
ANCE

5.00-



THIS ACCOUNT IS SUBJECT TO A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE
ATTEST:

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY B. Parman
TRUST OFFICE